PTO/SB/21 (09-04) Approved for use through 07/31/2006. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE the Paper Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application Number 10/718,388 TRANSMITTAL Filing Date Nov 20, 2003 **FORM** First Named Inventor Truett P. Mills Art Unit 3711 (to be used for all correspondence after initial filing) **Examiner Name** Sebastiano Passaniti Attorney Docket Number TPM-43-CIP Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply) After Allowance communication to (TC) х Fee Transmittal Form Drawing(s) Appeal Communication to Board of Licensing-related Papers Fee Attached Appeals and Interferences Appeal Communication to TC Amendment / Reply Petition (Appeal Notice, Brief, Reply Brief) Petition to Convert to a After Final Proprietary Information Provisional Application Power of Attorney, Revocation Affidavits/declaration(s) Status Letter Change of Correspondence Address Other Enclosure(s) (please identify х Extension of Time Request Terminal Disclaimer below): Return Receipt Postcard Express Abandonment Request Request for Refund CD, Number of CD(s)_ Information Disclosure Statement Landscape Table on CD Certified Copy of Priority Document(s) Remarks Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name Signature Printed name J. Bennett Mullinax Date 36221 November 15, 2005 Reg. No. CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. Signature

Peggy SABAK Typed or printed name Date November 15, 2005

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TRANSPORTED TO THE PROPERTY OF	Effective on 12/8/2004. Effective on 12/8/2004. Effective on 12/8/2004. Effective on 12/8/2004.				cation Number	Number 10/718,388		
FEE TRANSMITTAL					Date	11/20/2003		
FEE IRANSWILLAL					lamed Inventor	Truett P. Mills		
For FY 2005					iner Name	Sebastiano Pa	ssaniti	
X Applicant Claims small entity status. See 37 CFR 1.27					nit	3711		
TOTAL AMOUNT OF PAYMENT (\$) 350.00					ey Docket No.	TPM-43-CIP		
METHOD OF PAYMENT (check all that apply)								
x Check Credit Card Money Order None Other (please identify):								
X Deposit Account Deposit Account Number: 50-3172 Deposit Account Name: J. Bennett Mullinax, LLC								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
Charge fee(s) indicated below Charges fee(s) indicated below, except for the filing fee								
x Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and								
authorization on PTO-2038.								
FEE CALCULATION								
1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES EXAMINATION FEES								
Small Entity Small Entity Small Entity								
Application Type	Fee (\$)	Fee (\$)		Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)	
Utility	300	150	500	250	200	100	\$\$	
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
Reissue	300	150	500	250	600	300		
Provisional	200	100	0	0	0	0		
2. EXCESS CLAIM FEES Small Entity								
Fee (\$) Fee (\$)								
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 50 25								
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100								
Multiple dependent claims 360 180								
Total Claims	Extra Clain	<u>15</u>	Fee (\$)	Fee Paid (\$)]	Multiple Depende		
21 - 20 or H	P= 1	x	\$25.00 =	\$ 25.00		<u>Fee (\$)</u>	Fee Paid (\$)	
HP = highest number of total claims paid for, if greater than 20 \$180.00								
Indep. Claims	Extra Clain	<u>ns</u> .	Fee (\$)	Fee Paid (\$)				
5 - 4 or HF			= =	\$100.00				
HP = highest number of independent claims paid for, if greater than 3								
3. APPLICATION SIZE FEE								
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity)								
for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41 (a)(1)(G) and 37 CFR 1.16(s). <u>Total Sheets</u> <u>Extra Sheets</u> <u>Number of each additional 50 or fraction thereof</u> <u>Fee (\$)</u> <u>Fee Paid (\$)</u>								
30 - 100 = 0 /50 = 0 (round up to a whole number) x \$125.00 = \$0.00								
4. OTHER FEE(S) Fees Paid(\$)								
Non-English Specification, \$130 fee (no small entity discount)								
Other: 2 month extension of time 225.00								
CUDALTITO DV								
SUBMITTED BY	() 12 M	2002	Red	istration No.	36221	Teleph	one 864 987 9696	
Signature	H. 1711			rney/Agent)	30221		11/15/2005	
Name (Print/Type) J. Bennett Mullinax Date 11/15/2005								

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